

State of New Hampshire

Banking Department

64B Old Suncook Rd
Concord, NH 03301

Peter C. Hildreth
Bank Commissioner

Robert A. Fleury
Deputy Bank Commissioner

Telephone: (603) 271-3561

Fax: (603) 271-0750

www.state.nh.us/banking

MORTGAGE BANKER and BROKER BRANCH OFFICE APPLICATION **INFORMATION**

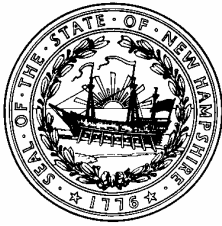
General Instructions

Business locations of a first mortgage banker, broker or banker/broker and or second mortgage broker or second mortgage home loan lender that are located in New Hampshire must be licensed as branches of the main licensee. This form is intended to be used only by companies that are currently licensed as first mortgage bankers, first mortgage brokers or first mortgage banker/brokers, or as second mortgage brokers or second mortgage home loan lenders, or both, and who want to add a branch office in New Hampshire. The branch office license fee for first or second mortgage business is \$250 for each type of business. Each branch will be licensed for and may conduct the type(s) of mortgage business that the applicant is licensed to conduct.

Please make sure the following are included with the application:

- Correct fees: if you are adding a branch office and you currently hold both a first mortgage license and a second mortgage license, the branch you are adding needs to obtain both types of licenses. You may use this form to apply for both types of licenses for a single branch location. The fees for each branch licensed for the two types of business will be \$500 (\$250 for the first mortgage license and \$250 for the second mortgage license).
- You may use this form to add a single NH branch office location. A separate form must be used for each branch office location to be added/opened. The form can only apply to a single branch address.
- Do not use this form to change information (including moving or closure information) about a currently licensed branch; use the license amendment form.
- Mortgage brokers, bankers and banker/brokers must submit a list of all persons working from or supervised by this new branch office who originate mortgages for them. There is a form included in this application, but you may omit that form if you file the report of originators electronically instead. Please visit our website at www.state.nh.us/banking for the electronic link.
- If the new branch is to be operated under a trade name, the licensee responsible for the branch office and its operations must provide proof of trade name registration issued by the NH Secretary of State. (Telephone Number: 603-271-3244) The "Owner" of the trade name listed on the registration must match the name of the "Licensee". If these are not the same, ownership must be changed through the Secretary of State's office.
- Submit a copy of the resume of the branch manager.
- This application and affirmation must be signed by a duly authorized officer of the licensee who is responsible for the operation and supervision of the branch to be licensed.

Please make sure that all items on the application form are completed and any attachments, numbered to correspond to the question or item to which they respond, are enclosed with the application filing. Please include the applicant's name on each attachment. Inclusion of a list/index of attachments is recommended. Care in providing all the required information will result in the filing of a complete application and will enable us to expeditiously review the application without the need to write for further information.



State of New Hampshire

Banking Department

64B Old Suncook Rd
Concord, NH 03301

Peter C. Hildreth
Bank Commissioner

Robert A. Fleury
Deputy Bank Commissioner

Telephone: (603) 271-3561
Fax: (603) 271-0750
www.state.nh.us/banking

FORM 397-8 -A - 4

APPLICATION FOR FIRST AND/OR SECOND MORTGAGE BANKER AND/OR BROKER BRANCH OFFICE LICENSE

Application Fees for First Mortgage Branch

Current license type held by the licensee,
check ONE:

<u>Type</u>	<u>Current NH First Mortgage Principal Office License Number</u>
____ First Mortgage Broker	_____
____ First Mortgage Banker	_____
____ First Mortgage Banker/Broker	_____

Enclose \$250 for the first mortgage branch office being added/opened
by this application.

Application Fees for Second Mortgage Branch

Current license type held by the licensee,
check ONE:

<u>Type</u>	<u>Current NH Second Mortgage Principal Office License Number</u>
____ Second Mortgage Home Loan Lender	_____
____ Second Mortgage Broker	_____

Enclose \$250 for the second mortgage branch office being added/opened
by this application.

Make Check(s) Payable To: "STATE OF NEW HAMPSHIRE"

Complete all items, sign and notarize the affirmation.

Date of this filing: _____, 200 _____

FOR OFFICE USE ONLY

Ck. # _____

Amt. \$ _____

Rec'd by _____ Date _____

Entered By _____ Date _____

App. Complete _____ Date _____

Approved By _____ Date _____

Pr. Lic. # _____ Date Mailed _____

NAME AND IDENTIFICATION OF LICENSEE

1. Legal name of licensee: _____

Is the licensee adding a trade name for this branch license application? _____ ("yes" or "no"; if "yes", state the trade name and attach copy of trade name registration issued by NH Secretary of State. The trade name provided below must match the trade name registration issued by NH Secretary of State)

Trade Name _____

INFORMATION ABOUT THE BRANCH OFFICE BEING ADDED BY THIS APPLICATION

2. Address of branch office being added/opened:

(Street) (City) (State) (Zip)

Mailing address, if different: _____
(Street or PO Box) (City) (State) (Zip)

Communications _____
(Tel. no.) (Fax no.) (Cell) (E-mail Address)

3. Date Office Opened or is Scheduled to Open _____

4. Branch Manager's Name _____

5. Has the above named branch manager ever been convicted of a misdemeanor or felony? Yes _____ No _____ If "yes", furnish complete details, including dates, location, docket number, nature of crime, penalties, etc. on a separate sheet.

PERSON COMPLETING APPLICATION

(Name) (Title) (Direct Telephone No.)

(Mailing Address)

AFFIRMATION

I subscribe and affirm, under penalty of perjury, that the statements made in this application, including statements made in any accompanying papers, have been examined by me and to the best of my knowledge and belief are true, correct and complete, and that I am duly authorized to execute this affirmation. I understand that any misrepresentation made to the banking department may result in denial or revocation of the mortgage license to which this form relates.

I acknowledge on behalf of the licensee that the licensee's business at this location, if licensed, will be operated in accordance with the New Hampshire Revised Statutes Annotated and rules of the New Hampshire Banking Department, and that the licensee will supervise this branch office location and its personnel. I further acknowledge that the New Hampshire Banking Department is authorized to conduct examinations of the business affairs and records of the applicant's licensed business at any time with or without notice, and that all books, papers, files, related material, and records of assets, whether electronically stored or otherwise, shall be subject to the Department's examination.

Date: _____

For _____
(Print or type Licensee's name)

By _____
(Print or type name of the authorized signatory)

Signature _____

Title _____

CORPORATE ACKNOWLEDGMENT

State or Province of _____ }
County of _____ } ss.

On this _____ day of _____, 20____, before me _____,
(Print name of Notary/JP)
the undersigned officer, personally appeared _____
(Print name of corporate officer signing this document)
known personally to me to be the _____ of the above named corporation and
(Title of officer)

acknowledged that he or she, as an officer being authorized so to do, executed the foregoing instrument
for the purposes therein contained, by signing the name of the corporation by himself or herself as an officer.
IN WITNESS WHEREOF I have hereunto set my hand and official seal.

(SEAL)

Notary Public/JP Signature
My Commission Expires _____
(Date)

INDIVIDUAL OR PARTNERSHIP ACKNOWLEDGMENT

State or Province of _____ }
County of _____ } ss.

On this _____ day of _____, 20____, before me _____,
(Print name of Notary/JP)
the undersigned officer, personally appeared _____ known to
(Print name of individual signing this document)

me personally and known to me to be the same person whose name is signed to the foregoing instrument,
and acknowledged the execution thereof for the uses and purposes therein set forth.

In WITNESS WHEREOF I have hereunto set my hand and official seal.

(SEAL)

Notary Public/JP Signature
My Commission Expires _____



Peter C. Hildreth
Bank Commissioner

Robert A. Fleury
Deputy Bank Commissioner

State of New Hampshire

Banking Department

**64B Old Suncook Rd
Concord, NH 03301**

Telephone: (603) 271-3561

Fax: (603) 271-0750

www.state.nh.us/banking

REPORT OF MORTGAGE ORIGINATORS

NO FEE

Check one: Initial Report Update information (highlight or otherwise mark the changes)

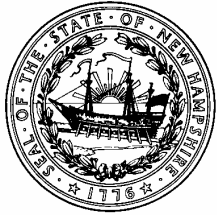
Date of this filing: _____, 200

NAME AND IDENTIFICATION OF LICENSEE

1. Legal name of licensee: _____
2. Applicant's federal tax ID number: _____
3. Name and telephone number of person completing this form: _____
(Print Name) (Tel. No.)

YOU DO NOT NEED TO MANUALLY COMPLETE THIS FORM. YOU MAY FILE THE REPORT OF ORIGINATORS ELECTRONICALLY. Please see our website at www.state.nh.us/banking for the electronic format. Otherwise, fill out the form below to provide a list of all individuals, wherever located, who will originate, make or broker New Hampshire mortgage loans for your company. Include each person's first name, last name, middle initial and any suffix, business address, last 4 digits of the originator's Social Security Number and business telephone number; attach an additional sheet if necessary:

[illegible]



Peter C. Hildreth
Bank Commissioner

Robert A. Fleury
Deputy Bank Commissioner

State of New Hampshire

Banking Department

64B Old Suncook Rd
Concord, NH 03301

Telephone: (603) 271-3561
Fax: (603) 271-0750
www.state.nh.us/banking

AUTHORIZATION/RELEASE FORM **FOR NON-DEPOSITORY LENDERS AND BROKERS**

INSTRUCTIONS: To be completed by each senior officer (senior vice president and higher), director, branch manager, partner, trustee, member and owner of 10% or more of the applicant. Please type. This form may be duplicated. Publicly traded corporations, and the wholly owned subsidiaries of publicly traded corporations that are members or owners may submit the company's or the parent corporation's most recent U.S. Securities and Exchange Commission Form 10-K and 10-Q in lieu of this authorization.

Submitted in connection with an application made for a non-depository lender and/or broker license application pursuant to RSA 397-A, 398-A, 399-A, and/or 361-A by:

(Name of Licensee or Applicant)

(Name of Officer, Owner, Director, Manager, Branch Manager, Partner, Trustee, Member)

I hereby authorize the State of New Hampshire Banking Department to request and receive credit reports, tax records; local, state, federal or international governmental records, police and criminal records from any and all law enforcement officials, personal background reports and reports from national and/or regional databases, employment information, current and past record of conduct with any regulatory entity or agency, and further authorize that such information may be released to the State of New Hampshire Banking Department by such entities and/or officials upon presentation of this authorization, or a photostatic copy hereof. I understand that the State of New Hampshire Banking Department will utilize any information it receives as a result of this authorization for purposes of determining compliance with licensing standards set forth in RSA 397-A, 398-A, 399-A, and/or 361-A, as applicable. I understand that this authorization does not expire. If the above applicant is a retail seller, I understand the Department will not request and receive credit reports in my name.

_____ (Type name)	_____ (Date of Birth)
_____ (Signature)	_____ (Number and Street Address)
_____ (Date)	_____ (City and State of Residence)
_____ (Title)	_____ (Zip Code)
_____ (Social Security Number)	

INDIVIDUAL ACKNOWLEDGMENT

State or Province of _____ }
County of _____ } ss.

On this _____ day of _____, 20____, before me, _____,
(Print name of Notary/Jp)

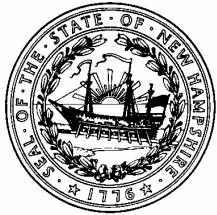
the undersigned officer, personally appeared _____ known to
(Print name of individual signing this document)

me personally and known to me to be the same person whose name is signed to the foregoing instrument,
and acknowledged the execution thereof for the uses and purposes therein set forth.

In WITNESS WHEREOF I have hereunto set my hand and official seal.

(SEAL)

Notary Public/Jp Signature
My Commission Expires _____



Peter C. Hildreth
Bank Commissioner
Robert A. Fleury
Deputy Bank Commissioner

State of New Hampshire

Banking Department

64B Old Suncook Rd
Concord, NH 03301

Telephone: (603) 271-3561
Fax: (603) 271-0750
www.state.nh.us/banking

PERSONAL BACKGROUND and FINANCIAL DISCLOSURE STATEMENT **NON-DEPOSITORY LENDER/BROKER**

INSTRUCTIONS:

- To be completed by each individual principal/owner /investor of 10% or more of the applicant, and each officer of the applicant, each manager (senior, vice president or higher), member, partner, director, trustee and each NH branch manager.
- This form is required of new applicants, and of existing licensees to amend information on file with the Department when they add officers, directors, managers, members, partners, trustees or NH branch managers.
- Please type or print. Complete all items. Attach additional sheets as necessary or indicated. This form may be duplicated if additional copies are required.

Date _____

NAME OF APPLICANT/ LICENSEE: _____

EIN: _____

LICENSE TYPE: _____

1. IDENTIFYING INFORMATION:

Name of (Owner, Officer, Director, Manager, Trustee, Partner, Member, Branch Manager, Other – circle those that apply)

(Name)

Street _____ Apt. _____

(Home street address: do not use P.O. Box address; do not use business address)

City _____ State _____ Zip Code _____

Mailing Address (if different) _____

Other names by which you have ever been known:

Date of Birth _____ Social Security # _____

Place of Birth _____

(City)

(State)

Drivers License # _____ State _____

2. EDUCATION:

Indicate highest grade completed: _____ Name and address of last institution attended:

Degrees Received and Dates:

List other relevant education on a separate sheet.

3. PERSONAL BALANCE SHEET:

<u>ASSETS</u>		<u>LIABILITIES</u>	
a) Cash on hand and in banks	\$ _____	i) Accounts payable	\$ _____
b) Notes, loans and other accounts receivable considered active and collectible	\$ _____	j) Notes payable to banks	\$ _____
c) Marketable securities (Attach schedule w/details)	\$ _____	k) Notes payable to others	\$ _____
d) Real Estate (Attach schedule with details)	\$ _____	l) Real Estate Mortgages	\$ _____
e) Automobiles	\$ _____	m) Interest and taxes due and unpaid	\$ _____
f) Net worth of business (Attach most recent financial statement)	\$ _____	n) Other debts & liabilities	\$ _____
g) Life insurance cash surrender value	\$ _____	TOTAL LIABILITIES (B)	\$ _____
h) Other assets (Attach schedule with details)	\$ _____	TOTAL NET WORTH (C)	\$ _____ (A minus B)
TOTAL ASSETS (A)	\$ _____	TOTAL LIABILITIES AND AND NET WORTH	\$ _____ (B plus C)

Notes, accounts receivable, mortgages and other assets considered doubtful, and not included in above financial statement have an estimated value of \$ _____.

4. INVESTMENT IN APPLICANT:

A. Amount to be invested, or currently invested, in the business is \$ _____, which will represent _____% of the business.

B. Does any amount stated in item 4-A. above represent a loan from you to the license applicant? Yes _____ No _____
If Yes, attach copy of promissory note.

C. Investment set forth in item 4-A. above will be, or has been, financed in the following manner:

5. FINANCIAL HISTORY:

- A. Have you been an owner of 10% or more of any business entity that has filed for bankruptcy protection?
- B. Have you ever filed for personal bankruptcy protection? _____
- C. If yes, supply particulars, including date, name and location of court, and docket number:

6. CONTINGENT LIABILITIES:

In addition to the debts and liabilities listed above, I have endorsed, guaranteed, or am otherwise indirectly or contingently liable for the debts of others as follows (attach an additional sheet if necessary):

Name & Current Address of Debtor/Obligor	Name & Current Address of Creditor/Obligee	Description of Collateral	Amount Due / Outstanding	Value of Collateral	Date the Obligation was Incurred

7. STATEMENT OF PERSONAL INCOME:

	Current Year
Salaries, wages and commissions from employment	\$ _____
Personal income from dividends and interest	\$ _____
Net personal income from rents, royalties and investments	\$ _____
Other personal income (Source: _____)	\$ _____
TOTAL INCOME	\$ _____
ANNUAL PERSONAL EXPENSES	\$ _____
NET INCOME	\$ _____

8. EMPLOYMENT: Attach a separate sheet listing your work history, beginning with your current employment, and all businesses with which you have been involved, and/or all periods of unemployment for the last 10 years. Include all corporations, partnerships or any other business ventures in which you had an investment or interest of 10% or more, or with which you have been associated as an officer, director, or in a capacity influencing policy or management. Also include dates of association, job title, name and address of the business/employer, description of your duties/responsibilities, name of immediate supervisor and reasons for leaving.

9. LENDING HISTORY:

- A. Have you ever been issued a license for lending or loan brokering by any other state, and have you or are you currently licensed to lend or broker loans in any other state? _____ If yes, attach a separate sheet setting forth the license number(s), name of the state licensing authority and dates during which such lending or brokering license was held.

B. Have you ever had a lending or brokering license revoked, suspended or denied, or been subject to any other disciplinary proceedings by this or any other state licensing authority? _____. If yes, attach a separate sheet which indicates the dates, licensing authority, and reason(s) for revocation, suspension, denial or disciplinary proceeding.

10. GENERAL CHARACTER: Have you ever been convicted of any misdemeanor or felony or other offense involving breach of trust, theft, forgery, deception, false advertising, false statements, fraudulent or dishonest dealing, or similar offense, or had a final judgment entered against you in a civil action upon grounds of fraud, misrepresentation, deceit or similar reason? _____. If yes, list on a separate sheet the type of offense or judgment, the name and address of the court before which the case was heard, docket #, the date of the conviction or judgment and the sentence, penalty or award ordered.

11. OTHER INFORMATION: Indicate any other items of personal history considered relevant by you.

AFFIRMATION:

I hereby subscribe and affirm that the foregoing statements, including statements made in any accompanying papers, have been examined by me and to the best of my knowledge and belief are true, accurate and complete. I understand that any misrepresentation made to the banking department may result in denial or revocation of the mortgage license to which this form relates.

Signature

Date

Title

INDIVIDUAL ACKNOWLEDGMENT

State or Province of _____ }
County of _____ } ss.

On this _____ day of _____, 20____, before me, _____,
(Print name of Notary/JP)

the undersigned officer, personally appeared _____ known to
(Print name of individual signing this document)

me personally and known to me to be the same person whose name is signed to the foregoing instrument,
and acknowledged the execution thereof for the uses and purposes therein set forth.

In WITNESS WHEREOF I have hereunto set my hand and official seal.

Notary Public/JP Signature

(SEAL)

My Commission Expires _____